SAFELY HOME, FAMILIES FIRST

Regional Service Council Minutes

Region #16 Meeting

Date: April 25, 2013

Time: 5:00 p.m.

Location of Meeting: Haub's Steak Haus, Haubstadt, Indiana

Meeting Chair: Regional Manager Virginia Combs

Meeting Secretary: LaJean Gentry

Call to Order: Start Time 5:00 p.m. CST

Roll Call: Quorum – 8 of 13 Voting Members Present

Voting Members Present

Virginia Combs Judge Robert Aylsworth Suzanne Draper Stephanie Repphan Melanie Flory (Proxy) Allison Miller Michael Summers

Others in Attendance

Valerie Nicholas

Michael Singleton
Natalie Kassenbrock
Shirley Starks
Kris Mann
Joseph Combs
Darcy Durbin
John Schroder
Lynne Wisneski
Trina Russell
Kristina Deters
Dr. Barbara Jessen
Nan Beever
Kelly Salee
Samantha Freeman

Jim Ward
Molly Elfreich
Kelly Hunckler
Dr. Donna Culley
Kim Bivens
Laura Wathen
Rick Carlson

Phone Present Absent with Regret

None Jan Dotson
Bonnie Pittman
Cynthia Smith
Sidney Hardgrave

Others in Attendance

Judge Timothy Crowley

T. J. Brink

Others Absent

Elizabeth Bryant Ann Hecht Rachelle Froeschke Terrie Decker

Keith Lindsey (Kid's Peace)

Lori McIntire
Rick Humbarger
Kathleen Johnson
Barb Tilley

Absent

Judge Jeffrey Biesterveld Judge Jeffrey Meade Judge Brett Niemeier Judge David O. Kelley Judge Keith A. Meier Judge James Redwine Judge Joseph Verkamp Lisa Harris

Kent Houchins Molly Coulston Nick Miller Jo Ann Krantz Mike Frye Doug Brown Jonathan Strauss Parker Trulock Karen Miller Michael Parker Lynn Kyle Nicole Schultz Shaye Isaacs Wendy Griffin-Allen Dr. John Ireland Elizabeth Fallen

Lynn Hert (Deaconess)

Norm Smith Jackie Foley Lynne Rump

Matthew Bigler (Warrck Co. Pros.)

Kaleigh Yochum Mike Jones (DOULOS)

Welcome

Approval of minutes from last meeting on October 25, 2012:

As read ___X___

Minutes of the October 25, 2012 RSC meeting had previously been e-mailed. Suzanne Draper made motion to approve the Minutes. Stephanie Repphan seconded that motion. Minutes of the October 25, 2012 meeting were approved as distributed by unanimous vote of the 8 voting members present.

As corrected

Program/Committee Reports

Permanency & Practice Support -- Joseph Combs - Gini introduced Joseph Combs, Assistant Deputy Director of Permanency and Practice Support. Mr. Combs related he had previously been the Director in Grant County, Region 7, and as such recognized a few of the faces in the audience. Mr. Combs began by explaining what his division of Central Office does. He noted that in 2004 – 2005 DCS took a hard look at their practice, from there undertook practice reform and has come far with the changes made in those few years. He stated reform was a change to become more child focused and to do things which are in the best interest of DCS kids. In these efforts DCS has been hiring other staff to assist case managers such as the education liaisons. Mr. Combs noted how impressed he was when he went with an education liaison to a child's meeting and how those liaisons are able to communicate with school staff so that kids are getting IEP's, etc., that are needed.

Investigators, most of which are retired law enforcement officers, have also been hired to assist in locating parents and/or other relatives. The investigators have access to resources which case managers do not have, have already received hundreds of referrals and have been successful in locating hundreds of fathers, aunts and uncles and other relatives for kids. Mr. Combs noted they are also looking outside the box of people the kids may be able to connect with such as godparents, teachers, etc., with whom the kids may have a bond.

The nursing program is just getting off the ground. In addition to educational challenges, many DCS kids also have medical challenges. Having educated medical professionals is an important resource in looking at the medications prescribed, any drug interaction issues, and helping educate parents in how to care for their children.

Mr. Combs noted the clinical consultant program is also an amazing program, and he continues to hear very good things about those accomplishments as well.

Mr. Combs related that policy is constantly changing, and his philosophy is that practice drives policy and Central Office is constantly looking at ways to better policy to fit the needs of children.

The SNAP (Special Needs Adoption) specialists assist FCM's in connecting families and finding forever homes for children.

Permanency Round Tables relates to one of the items discovered during practice reform in that permanency was missing for some DCS kids with many kids having been in the system for years. Permanency is very important for children so that they have a family, a place to go on holidays, when Page 2 of 11

coming home from college on Christmas break, etc. DCS has partnered with the Casey Foundation by adding the PRT program which is a nationwide program already proven to work in several other states, including nearby Kentucky. PRT's are very intense internal staffings to look at cases and brainstorm for ideas regarding permanency for the child in each case presented. Cases which have lingered and do not seem to be attaining permanency are reviewed, looking at what has been done in the past and what can now be done to move the case forward. Mr. Combs reported this even includes looking at things to achieve permanency which may not be in policy in an effort to bust any barriers which may present a challenge. Mr. Combs used the example of a case in which the mother's rights had been terminated due to the mother's drug abuse and continued failing to provide for her child. An attempt at adoption had also failed. During the PRT it was asked where the mother was now, and a search was conducted which found the mother working in Washington, D.C., having turned her life around. The mother and child were able to be reunited. This would be something to keep in mind during PRT's as people do change and after a period of time the parent may be an option for the child's permanency. Other avenues of permanency for children may include friends or teachers who have worked with children in the past, who have established a strong bond with the child and/or child and family, and who may be able to become licensed as foster parents and later adopt the child. Sometimes these individuals have stronger bonds with the child than their relatives.

There will still be some children who are BDDS appropriate and need to live in an adult group home setting or other type of managed living arrangement due to the fact that they cannot function outside of that sort of structure. That does not mean, however, that these children do not deserve to have people in their lives that are important to them who can visit or pick them up for an outing. These cases can also be reviewed using the PRT process as it is important for all children to have permanency.

During the PRT process several different professionals across DCS are brought together to look at a case. These professionals may include someone from Mr. Combs' team who is well versed and has spent a lot of time familiarizing himself/herself with permanency and what that means. Other professionals include service experts who are well versed in the services available across the state. These individuals may be from the local area but could even be as far away as Lake County. Master practitioners, individuals who have worked in DCS for awhile and are knowledgeable in child welfare, and clinical consultants are also included. Cases reviewed include children that up to now have not moved forward for different reasons. Mr. Combs used the example of a child with mental illness and how the clinical consultant, who is a licensed clinician and a person who has worked at other agencies in the past and now works for DCS understands both sides and may know of resources for this child in another area of the state outside the local area which would be beneficial for the child. The clinical consultant may also inquire as to when the child was last baselined for medications, which can result in improvement in behavior which may allow the child to be placed in a foster home.

PRT time is limited so review is kept on target with focus on the child. When the FCM leaves the PRT they have a plan from brainstormed ideas presented and a person who will follow-up with them to continue to aid them through the process. Children are not present during this process as participants talk very candidly about the child's issues. PRT's do not take the place of Child and Family Team Meetings which are held with families and formal and informal supports of the family, nor do they replace the individual regional permanency committee teams. CASAs are viewed as a valuable piece for these kids and a protocol was created in that CASAs can write out their concerns and suggestions which are presented to the PRT. The PRT process is now opening up to Probation and that staff is now in the process of being trained. Orientation training is now being opened up to Judges as well.

Mr. Combs was asked how kids were referred to PRT. Mr. Combs noted the PRT looks at longtime kids who have lingered in the system. In some regions three cases per region are presented every month. If

the FCM, local office director and regional manager have a case they want the PRT to look at, that case will be reviewed, but the long time cases are the ones reviewed first.

Mr. Combs was then asked if there will be future orientation trainings in Evansville. The answer was yes with the usual pattern of training occurring north, central then south using the example of Lake County, Indianapolis and then Jeffersonville. Next time the south meeting may occur in Evansville.

Mr. Combs was asked about having monthly PRT reviews rather than quarterly reviews. He noted the timing of reviews is really based on the needs of the region. Some regions are initiating monthly reviews due to the number of kids which need to be presented.

Gini thanked Mr. Combs for coming, noting how amazed she has been by the ideas presented at the PRT in an effort to insure that some of the longest running kids have achieved some sort of success and permanency. Gini reported Region 16 has been meeting every other month and will evaluate the frequency of meeting.

Program/Committee Reports

<u>Community Partners Report</u> –Natalie Kassenbrock — Natalie referred all present to the IHBS t-shirts on the table which advertise the Kids Trust License Plate fund.

Natalie reported a conference call will be held on Monday, April 29, with allocations for funding of prevention programs being released on that date. Those programs will be notified through e-mail as well as posting on the IHBS website. Once allocation amounts are known, Ireland will have the subcontractors submit their proposals which are due by May 31. Proposals will be reviewed, approved and voted on by the RSC by July 1.

Community Partners reports continue to be posted to the IHBS website. Ireland is currently servicing 148 families in Region 16 with 63 new family referrals having been received in March. Of the closed cases, 96% achieved at least one goal. The last report is the budget report with 74% of the funds having been used, so Ireland is very close to being on target. The fiscal year ends June 30.

Ireland's website is www.IHBS.us. Click on programs at the top and Community Partners will be one of the four programs listed there. Click on Community Partners. Information regarding RFP's, due dates, etc., will be posted and is similar to the way it has been done in past years.

Region 16 Practice Indicators – Melanie Flory – Melanie stated reports continue to be able to be pulled from the new MaGIK child welfare system. Melanie noted that looking back from March of 2012 forward to March of 2013, the Practice Indicators have remained very stable during the past year. In the Safely Home Families First initiative, which is looking at ways to keep children safely in their own homes, an in-home CHINS or an Informal Adjustment, there has been a decrease of 3% in the last year.

For FCM contacts with child/ren (FCM's are required to see their children on a monthly basis either in the home or at school at least but at least every other month in the home), the rate has increased by 13% over the past year which is a huge improvement.

Practice Update

<u>CFTM's</u>—Jan Dotson— Gini noted Jan was unable to attend tonight's meeting so Melanie Flory will present Jan's information. Gini noted that at the last RSC there was discussion about increasing the numbers of CFTM's held and making sure staff was conducting and facilitating meetings at critical junctures in the case. Gini noted we now want to have workers focus on facilitating quality CFTM's. That will entail a lot of preparation before the meeting and helping the family understand what and why the meeting is being held, as well as having the worker help empower the family to feel they have a voice in the process. It is thus anticipated that there will be a decrease in the numbers of CFTM's as supervisors will be working with staff by looking at CFTM notes from their meetings and observing the meetings to ensure quality.

Melanie noted the goal of the CFTM was to assist the family in building a team around their family so that they can still work through a crisis after DCS leaves. In order to make sure that the team meetings have some quality to them supervisors and directors are randomly reviewing the notes completed and helping FCM's identify some of the formal and informal supports for families. In-service trainings are provided on a regular basis which helps the FCM improve the process of preparing a family for their team meeting. CFTM numbers do fluctuate because there are several new FCM's in the training process.

During the first quarter of 2013, the CFTM numbers increased by 11% over the last quarter of 2012.

<u>Peer Coaches</u> – There have been a lot of changes with the peer coach consultants. Central Office is hiring three additional consultants throughout the state, but it is not yet known where the consultants will be located. Bonnie is training two peer coaches in Vanderburgh County and conducting in-service trainings throughout the southern half of the state. A statewide peer coach training will occur in Indianapolis in July.

Regional Foster Care -- Samantha Freeman – Sam is the new supervisor over the foster care unit and began her duties in February of this year. Relative Care positions have just been added to the foster care unit. These staff members (two in Region 16) will work with relatives as soon as a child is removed to either place a child with relatives at that time or work with the assessment workers to locate relatives. These workers will provide one on one support by meeting with relatives within 48 hours to assist with applying for food stamps, TANF, and other needs. New foster care workers are being hired in Gibson and Warrick Counties and they will begin their duties with the FC unit hopefully by July. Homes licensed in the past month were 13 with Sam giving her unit a challenge to license two homes apiece per month. The FC unit is also working on obtaining more quality foster homes. Another item they are working on is placing more children in their home counties as 50% of the kids placed were placed out of county.

Recruitment efforts are ongoing. Magnets have been purchased and it was thought this might be an easy item to provide a person during recruiting. A magnet can be placed on the refrigerator and even though a family may not be able to foster at the present time the magnet will serve as a reminder that foster homes are needed. T-shirts have also been printed to wear to community events advertising the need for foster homes. FC staff will be making public service announcements on the radio in Knox County to promote foster care and are working with other radio stations in an effort to make such announcements. Sam asked that any providers who are holding events let her know and FC staff will attend.

Support groups meet every month between Knox and Vanderburgh Counties. One hour of training is offered at each support group meeting. Foster parents also have the opportunity to network at these meetings and that support is valuable.

Gini noted that relative support staff members have been added in an effort to assist relatives in caring for children of family members who otherwise might not be able to take on extra mouths to feed or possibly fail in their efforts to do so. Taking on three or four extra children can be overwhelming and these workers will assist relatives in navigating the system to ensure that all possible help is received. Licensing relative homes will provide financial support in addition to the emotional support relative care workers can provide.

QSR/QAR Update—Shirley Starks — Shirley noted the region's last QSR was held in August, 2012. Through that review two areas to work on were identified – team functioning and development of how the family can work on their own without DCS if/when DCS moves out of the case, and giving the child a voice. Those are the two things Region 16 is now working on. Practice in-service trainings are developed from the data received from the reviews. Most recently practice was on prepping the family for the team meeting. Shirley noted this was helpful and it is now important to make sure the players are prepared for that meeting from the family's perspective rather than from information from our own perspective from the family. After having conducted CFTM's for a few years, DCS is seeing families able to come together on their own without DCS.

The next QSR is in December of 2014, which gives the region a lot of time to work on these goals. Shirley noted it is expected that CFTM numbers will decrease but the region is still excited because it gives the region time to get in and work on skills. Shirley noted ongoing feedback from partners in the field is appreciated because it allows DCS to work on improving.

<u>Permanency Round Tables</u> – Allison Miller -- Ally noted the last PRT was held in February with four cases being presented. The next round table is set for May with four more kids being presented. It is also expected that a round table will be held in July. Region 16 was one of the last regions to roll out and is just now seeing the wave of some cases closing. Gini noted Susan Blackburn will facilitate PRT while Ally is on maternity leave.

<u>Budget Report</u> -- John Schroder -- John noted that when the RSC met in October a budget had not yet been received. Six months into the year the budget was received, and the Regional Financial Manager and the Regional Manager worked together on to how to distribute the allocations among the region's counties. Distributions were based on expenditures for the first six months of the year. One account which has noted an increase is Miscellaneous Costs of Wards. The reason for that may be due to placements with unlicensed relatives who need assistance in purchasing clothing, beds, bedding, day care, etc., for relative children (especially when the children come out of a meth home). Those relatives sometimes do become licensed relative homes and are thus able to receive a per diem for the child's care. Region 16 continues to do well with its budget.

Unfinished Business

<u>Judges' Updates</u>—Judge Timothy Crowley — Judge Crowley reported he has a unique problem in that CHINS numbers in Knox County have been somewhat down over the last year and a half. Judge Crowley further noted that because of meth CHINS numbers had reached a peak in the year 2010 of 200 cases that year. During the first quarter of 2011 there were 69 cases and after that it was as though "the tap had been turned off". There were 100 CHINS cases filed in the year 2012, half the number of 2010. In the first quarter of 2013 there have only been 12 cases filed. However, during this month of April 14 cases have been filed with 7 having occurred in the past week.

Judge Crowley noted the reason judges become concerned is that their numbers have to be reported quarterly to Indianapolis and those individuals in Indy want to make sure one judge is not working harder

than another judge. It is possible that Judge Crowley could be asked to help by hearing other cases, such as divorce cases. Judge Crowley noted this was a seasonal fluctuation.

--Judge Robert Aylsworth-- Judge Aylsworth noted that the appointment of Mary Beth Bonaventura was greeted favorably by most of the judges who have had anything to do with her over the years. Judge Aylsworth feels she will be a very good director for DCS. Judge Aylsworth also reported that sometimes judges get angry or frustrated as their jobs are not accomplished as a team and what they do they do alone and basically function by and large in isolation. Along with that they are working under time pressures. Judge Aylsworth asked that workers not take that personally as we have gotten through HB1011 and this is the system we now function in. Judge Aylsworth also stated he hoped DCS workers get raises because of the hard job that they do, noting a 20% turnover in staff is too much.

Gini noted she has asked each county to track the numbers of kids we have as wards whose parents have been involved in some way with meth, either using or making, and reported that average to be 42% of the kids on our caseloads. Knox County has the highest at 48% with the other counties falling under that. Children in meth homes are usually removed as the police arrest the parents. Gini noted that she has volunteered two of Region 16's counties, Knox and Vanderburgh, who have the highest removal rates, to be part of a project with the Casey Foundation called the Front End Project. DCS has worked on the back end with older kids in our system through the PRT and Permanency Committees. Gini noted she was excited about the idea of working on the front end as there is a lot of work done with families when they initially come into contact and we will try to figure out why that is and what we can do about that. Gini will keep RSC members informed about the front end project. Gini noted with the biennial plan there was discussion about educating the public about the meth issue in this region and there have been many opportunities to do that through the mayor's No Meth Task Force and town hall meetings.

<u>MaGIK Update</u> -- Gini noted MaGIK was the computer system that replaced ICWIS, and the system is much better than when it rolled out last July, but there are still glitches. More good news is that we are now able to get a lot of reports from MaGIK, but were without reports for several months and thus without important data which was very helpful to us.

New Business

<u>Proposals for Comprehensive Services</u> – Darcy Durbin – Darcy noted this service was developed last year and proposals put out. This service will do a couple of things for DCS, which is moving toward evidence-based practices. Part of the requirement to provide comprehensive services is that the agency's staff become trained in evidence based practices. DCS supports this training of staff for three different models: motivational interviewing, trauma focused behavior in therapy and family centered therapy. Family centered therapy is a model that deals with more complicated families that have higher therapy needs than our other families. Several proposals were received and several were considered during scoring. Raintree will provide motivational interviewing, but only in Knox County. IHBS was chosen for trauma focused therapy combined with 123 Magic. For family centered therapy, Ireland was also chosen. Darcy noted that after vote by the RSC, these proposals go to Central Office for further evaluation. Darcy noted this service moves away from a fee for a service where pay is by the hour to a per diem with agencies having to come up with a budget. Central Office will look at these budgets and start contract negotiations with each agency to see if they can come to an agreeable amount and move on to contracts. With family centered therapy there is an extra piece as agencies have to go through an interview process. The agency doing the certification for this program asked that only one family centered therapy per region be selected. This service is a higher level of service and a little more costly.

Darcy noted that throughout the state transportation was found to be an issue during the biennial plan. Most of Indiana is rural and thus there are transportation issues. Providers can only be paid currently for the time the client is in the car and they are working on goal directed services (which that has to be well documented). If a provider has to drive an hour to see a client, then travel somewhere with the client, and then drive an hour back home, there are two hours they are not getting paid at all. This is a barrier for a lot of providers and our clients who do not have adequate or sporadic transportation. With per diem payments, payment is being made for the day no matter what services are being used, transportation, therapy, homemaker services, collateral contacts, etc. This takes away from billing for each individual service provided to a family. Gini noted counties will be evaluating the cost of per diem payments verses payments for individual services to the high end families hoping it will be a cost savings for DCS in the long run.

Gini noted there are recommendations by the Directors for: Raintree Counseling to provide motivational interviewing; Ireland Home Based Services to provide trauma focused therapy with 123 Magic; and Ireland Home Based Services for family centered therapy. There were no comments or concerns. Suzanne Draper seconded the motion. Service recommendations were unanimously approved by the eight voting members present. Gini asked that any who wanted more information on the models e-mail her or Darcy and that information will be sent.

<u>Drug Screen RFP</u> – Gini noted she had received interest from a provider who wanted a RFP posted for drug screening for Region 16. Gini stated she had talked with the directors about this as there are currently five providers who do a good job of providing drug screens, feedback and testing. Gini reported the directors have made a recommendation for this request that needs to be voted on as well. At this time the directors have asked that a RFP for an additional drug screen provider not be posted. Darcy noted the next round of RFP's will be in July so this provider could submit a proposal at time if still interested in providing services. Gini asked for a second to the directors' motion. Melanie Flory seconded the motion. This motion was approved by unanimous vote of the eight voting members present.

<u>Child Fatality Teams</u> – Gini noted legislation was passed that Regional Child Fatality Review Teams be developed. Gini reported the region has a really sharp team with a lot of reps who are interested in the process and in reviewing the child fatalities in this region. Most of the fatalities in this region have been reviewed. Some very important ideas have been developed about what we can do for prevention purposes, and someone will be coming from Indianapolis to the May meeting to talk about the availability of cribs for families as there are many roll over and co-sleeping fatalities in this region. Gini stated she would bring back a report at the next RSC meeting.

<u>Miscellaneous</u> – Gini noted we continue to work on finding a replacement for the prosecutor voting member and will have that information and vote at the next meeting.

Public Testimony/Announcements

Kristina Deters, Education Liaison, provided an update on the progress she has made. Kristina stated she felt she had been positively received in the schools and has attended several school meetings. Kristina stated her mission this summer was to visit the RSC. Kristina noted she has touched over 100 cases and feels education needs are beginning to be identified, is assisting FCM's when they have questions, has made inquiries and education liaisons will be doing some things in MaGIK soon that will make things easier for workers in the field. Kristina stated she had just attended three days of Mind in the Making training which will be a wonderful thing to bring to Evansville, which is one of the six cities in the state which will be part of this project.

Donna Culley from Southwestern Behavioral Health Care reported there will be a Fun Day at Garvin Park on May 4th from 9:00 a.m. to 1:00 p.m. Several community partners will have tables and information about services. The idea is to promote children's mental health awareness month in May. They will also be using this opportunity to launch the regional system of care. Volunteers are appreciated for this event.

Barbara Jessen reported they started the truancy intervention program a month ago and will have nine in the program as of tomorrow. There are two part time staff members for this program, and all of the program members are attending school at this time.

Molly from Holly's House reported a letter had been sent regarding perpetrators who were part of a sibling group. Molly noted for assessment workers and families it was much easier for all family members to be in attendance at the same time but very traumatic for the victim to have the perpetrator in the same waiting room or in the car. Children are becoming very upset and breaking down, which causes them to view Holly's House as a negative place where their family fell apart. The purpose of Holly's House is for the child to feel safe. As a result, it is felt that interviews for victims and perpetrators should be split so that they are not at Holly's House at the same time.

<u>Next Meeting Date, Location and Time</u>: Gini noted at the next RSC meeting voting will take place regarding community partners prevention funding. As a result, RSC will need to meet in June. The only available date at this time is June 11 (Tuesday), so RSC will meet on June 11, 2013 at 5:00 p.m. Central Time at Haub's Steak House, Haubstadt, IN.

Signatures:		
Secretary		Chair
Date		Date
Approved:	(Secretary's initials)	Date:

Region 16 Motion Chart

Regional Service Council Region <u>16</u> Mot Date: April 25, 2013 Chair: Regional Manager Virginia Combs

Motion	Discussion	Action	Person Responsible
1. Motion to approve the minutes from the October 25, 2012 meeting.	None	Adopted – Approved by the 8 voting members present	Motion by Suzanne Draper to approve Seconded by Stephanie Repphan All voting members approved
2. Motion to approve: Motivational Interviewing services by Raintree Counseling in Knox County; trauma focused therapy with 123 Magic services provided by Ireland Home Based Services; and family centered therapy services to be provided by Ireland Home Based Services.	None	Adopted – Approved by the 8 voting members present	Motion by Region 16 Directors Seconded by Suzanne Draper All voting members approved.
3. Motion not to approve opening up a RFP for drug screening in Region 16.	No need for additional drug screening providers at this time.	Adopted Approved by The 8 voting members Present	Motion by Region 16 Directors Seconded by Melanie Flory All voting members approved.

Vote count must be recorded in the minutes.